

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 26 PM 4:18

DOCUMENT # **P05044** (3)

1. Corporation Name

FOLKSAMERICA REINSURANCE COMPANY

Principal Place of Business

**ONE LIBERTY PLAZA
19TH FLOOR
NEW YORK NY 10006**

Mailing Address

**ONE LIBERTY PLAZA
19TH FLOOR
NEW YORK NY 10006**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/18/1985

3a. Date of Last Report

02/09/1994

4. FEI Number

13-2997499

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

Zip

Country

24

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**KROLL, POMERANTZ & CAMERON
ATTN: ROBERT A. FREYER
3250 MARY STREET
MIAMI FL 33133**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
FASS, STEVEN E.
1 LIBERTY PLAZA, 19TH FLOOR
NEW YORK NY**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
MCGOLDRICK, ROBERT F.
1 LIBERTY PLAZA, 19TH FLOOR
NEW YORK NY**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
HENRIKSSON, ANDERS
BOHUSGATEN 14
STOCKHOLM, SWEDEN**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
TYBURSKI, MICHAEL E
1 LIBERTY PLAZA, 19TH FLOOR
NEW YORK NY**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CUMMINS, JARED J
1 LIBERTY PLAZA, 19TH FLOOR
NEW YORK NY**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
TRACE, WARREN J.
1 LIBERTY PLAZA, 19TH FLOOR
NEW YORK NY**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael E. Tyburski

Michael E. Tyburski, Senior VP, CFO & Secretary 1/18/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Name)

(Signature/Typed #)

FOLKSAMERICA GROUP

January 16, 19954

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: **Folksamerica Reinsurance Company
Corporation Annual Report - 1995**

Dear Sir:

Enclosed is the Corporation Annual Report - 1995 completed on behalf of Folksamerica Reinsurance Company.

Also enclosed is our check in the amount of \$200.00 which represents payment in full of the filing fee.

Sincerely,
Folksamerica Reinsurance Company


Linda M. Lieberman
Regulation & Compliance Administrator

Enclosure
(check)

Company Name: FOLIOAMERICA REINSURANCE COMPANY
DIRECTORS AND OFFICERS INFORMATION

01	02	03	04	05	06	07	08	09	10	11	12	13	14	15
LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	SOCIAL SECURITY NUMBER	DATE OF BIRTH	POSITION		STREET ADDRESS #1	CITY	STATE (ABBV)	ZIP CODE	TITLE		
						01 DIRECTOR	02 OFFICER, 03 BOTH 04 ATTORNEY-IN-FACT							
01 Carney	Joseph	Eugene		113-36-5773	11-25-45	01	12-15-83	4 Heming Avenue	Cranford	NJ	07016	Director		
02 Cummins	James	John		150-20-9616	10-06-30	01	05-12-82	4 Dogwood Drive	Yardley	PA	19087	Director		
03 Dell	Helen			100-44-8730	06-25-54	03	05-15-81	488 6th Street	Brooklyn	NY	11215	Vice President & Director		
04 Foss	Steven	Edict		059-40-0078	02-02-46	03	04-09-85	11 Cook Place	Middletown	NJ	07748	President & Director		
05 Gullen	Mark	Charles		351-36-5943	04-21-46	02	10-01-83	2121 E. Wellington Rd	Newtown	PA	16840	Director		
06 Graesspan	Morton			048-16-9773	02-07-22	01	05-01-85	218-43 28th Road	Bayville	NY	11700	Director		
07 Griffin	Charles	Leonard		154-20-2341	06-30-29	01	05-12-82	53 Eileen Way	Edison	NJ	08537	Director		
08 Haley	Peter	Brian		007-40-6253	07-23-42	03	05-12-82	81 Arrowhead Dr	Guttenberg	CT	06437	Sr. Vice President & Director		
09 Handlman	Anders	Robert		500420-4312	04-20-59	01	05-15-81	Tritons Vag 45	Stockholm	SWEDEN		Chairman		
10 Hester	Robert	Anthony		039-32-9154	07-08-41	02	10-15-82	37 Sunnyvale Pl	Livingston	NY	10533	Vice President		
11 Kral	Edict	Mark		132-40-9953	01-05-53	01	05-01-85	32 Lany's Lane	Pleasantville	NY	10570	Director		
12 Kral	Sam			039-09-5382	06-10-18	01	09-01-79	32 Stonewall Lane	Mauritown	NY		Director		
13 McGoldrick	Robert	Francis		155-46-0865	09-25-51	03	07-30-84	11 Holcomb Ave	Butler	NJ	07405	Sr. Vice President & Director		
14 Mullen	John	Patrick		061-30-4101	03-12-40	02	05-12-82	351 San Gabriel Ct	Serra Madre	CA	91024	Vice President		
15 Murphy	Patrick	Joseph		108-40-5590	01-27-49	02	05-12-82	92 West Poplar St	Floral Park	NY	11001	Vice President		
16 Strak	Stephen	James		155-42-7811	09-12-50	02	05-15-81	18 Mountside Dr	Monticello	NJ	07960	Vice President		
17 Tice	Warren	John		105-50-2510	06-09-50	02	01-01-80	124 Diamond Lane	Old Bridge	NJ	08857	Vice President		
18 Tice	Max	Michael		080-40-9278	09-20-59	01	05-01-88	105 Ft Drive	East Hills	NY		Director		
19 Tyndall	Michael	Edward		155-36-7661	02-10-50	03	04-01-82	339 Durham Place	Glen Rock	NJ	07452	Sr. Vice President, Secretary, Treasurer, CFO & Director		